UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE INDEPENDENCE NATIONAL HISTORICAL PARK 143 SOUTH THIRD STREET PHILADELPHIA, PA 19106

APPLICATION/PERMIT - WEDDING PHOTOGRAPHS

APPLICANT: Type/print in black ink the information requested in items 1 - 7. After completing all items, sign and date the certification in item 8 and return this application along with a check or money order for the application charge of \$50.00 and the appropriate location fee. Make the check/money order payable to Independence National Historical Park, and forward to: Independence National Historical Park, 143 South Third Street, Philadelphia, PA, 19106, Attn: Special Events Office.

1.	APPLICANT Name:	PHOTOGRAPHER Nam	e:			
	Street/Address:	Street/Address:				
	City/State/Zip Code:	City/State/Zip Code:				
	Phone No.: Day ()Evening ()	Phone No.: ()				
	Fax: () Email:					
3.	Date Requested:(Month/	Day/Year)				
4.	Time Requested: First Choice: (am/pm) Note: Time will be limited to one hour.	Second Choice:	(am/pm)			
5.	Area Requested: First Choice:	Second Choice:				
6.	Public Law 106-206 requires the park to collect location fees for filmin by the number of people on site for the filming activity. Please check th \$50.00 application fee.					
	1 – 10 people: \$50	_11 – 30 people: \$150	Over 30 people: \$250			
7.	Name of person who will be in charge of the event on-site:	make any on-site decisions about	Phone Number: () the event.			
8.	The applicant by his or her signature certifies that: 1) all the information given is complete and correct, and that no false or misleading information or false statements have been given; and 2) the attached terms and conditions have been read, are understood, and will be complied with fully.					
	Signature of Permittee (Do not print)	D.	ate			
	PERMIT - WED	ODING PHOTOGRAPHS				
	Authorized by Title 36, Code of Federal Regulations, Chapter 1, Section d conditions of this permit.	§2.50, permission is hereby gran	ted to take wedding photographs subject to the terms			
Ge	eneral PERMIT CONDITIONS - See Attached Pages. Specific Terms, Co.	onditions, or Limitations Applicab	le to this Permit:			
ΑF	PPROVED BY: Signature of Park Representative	Title	Pote			
	Signature of Fark Representative	rue	Date			
PE	RMITTEE: Mailed / Faxed / Received					

Paid: Date:

Location Fee_

Application Charge _